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2292 7:	590 02/14	/2008		have its own certificate	of mailing or	r transmission.	O.
				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUB FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
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			l	· · · · · · · · · · · · · · · · · · ·			(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	TOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/530,749 04/08/2005		Jong-Mog Kim		0630-2291PUS1		7338	
TITLE OF INVENTION: F	ERMETIC COMPRE	SSOR					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	UE PREV. PAID ISSU	E FEE TOT	'AL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	05/14/2008
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS				
TAPOLCAI, WI	ILLIAM E	3744	062-295000	_			
I. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indicate PTO/SB/47; Rev 03-02	dence address (or Char 22) attached,	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is					
PTO/SB/47; Rev 03-02 · Number is required.	or more recent) attache	2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
LG Electronics Inc. Seoul, Republic of Korea							
Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee Dublication Fee (No.s	d.	is attached					
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies Four (4)  Paym				ent by credit card. Form PTO-2038 is attached. irector is hereby authorized to charge the required fee(s), any deficiency, or credit any syment, to Deposit Account Number <u>02-2448</u> (enclose an extra copy of this form).			
5. Change in Entity Status	(from status indicated	Labove)	overpayment, to D	eposit Account Numbe	r_02-24	48 (enclose an	extra copy of this ferm).
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.,  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
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Authorized Signature	James [ [	Eller []	<b>٢</b>	Date <u>May</u>	y 13, 20	800	
Typed or printed name	James T. E	11er, Ør.		Registration N	o. 39,5	538	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							